



September 25, 2025

The Honorable Mike Johnson  
Speaker of the House  
United States House of Representatives  
521 Cannon House Office Building  
Washington, DC 20515

The Honorable Steve Scalise  
Majority Leader  
United States House of Representatives  
266 Cannon House Office Building  
Washington, DC 20515

The Honorable Hakeem Jeffries  
Minority Leader  
United States House of Representatives  
2267 Rayburn House Office Building  
Washington, DC 20515

The Honorable Tom Emmer  
Majority Whip  
United States House of Representatives  
326 Cannon House Office Building  
Washington, DC 20515

The Honorable Katherine Clark  
Minority Whip  
United States House of Representatives  
2368 Rayburn House Office Building  
Washington, DC 20515

Dear Mr. Speaker, Rep. Scalise, Rep. Jeffries, Rep. Emmer, and Rep. Clark:

The National Association of Rural Health Clinics (NARHC) and the National Rural Health Association (NRHA) respectfully urges House leadership to support the advancement of three, recently introduced bipartisan bills that will modernize and strengthen Rural Health Clinics (RHCs) - essential providers of outpatient care for over 39 million Americans in rural, medically underserved parts of the country.

For more than 45 years, Rural Health Clinics (RHCs) have served an indispensable role in the country's healthcare safety net. In 2024, RHCs serviced over 11% of the entire population and about 62% of the nearly 61 million individuals living in rural America.

RHCs, however, face specific outdated federal barriers which limit their efficiency and utilization of their workforce. The series of bills below, introduced by Representative Tracey Mann (KS-01) and Representative Jill Tokuda (HI-02), reflect practical, targeted solutions to these very challenges.

**Rural Health Clinic Location Modernization Act:** Updates eligibility rules to reflect current Census classifications, ensuring communities under 50,000 residents remain eligible for RHC status. This bill preserves access for rural Americans while modernizing an outdated designation system from the 1970s. H.R.5198 is supported by NARHC, NRHA, the National Organization of State Offices of Rural Health, and [these 65 additional organizations](#).

**Modernizing Rural PA and NP Utilization Act:** Aligns federal regulations with state laws by allowing Physician Assistants/Associates and Nurse Practitioners to practice at the top of their license in RHCs – without federal supervision requirements which only remain in the RHC

setting. H.R.5199 is supported by NARHC, NRHA, American Association of Nurse Practitioners, American Academy of Physician Associates, and [these 77 additional organizations](#).

**Rural Behavioral Health Improvement Act:** Removes the 49% threshold on the amount of behavioral health services that RHCs can provide, allowing these facilities to better integrate mental health, primary care, and other services, all based on the needs of their patients, not an outdated threshold. H.R.5217 is supported by NARHC, NRHA, National Association for Rural Mental Health, and [these 74 additional organizations](#).

With these simple, but critical changes, RHCs can operate more efficiently, fully utilize the available practitioners in rural America, and meet the evolving needs of their patient populations, without risking their facility certification due to outdated federal barriers.

**Our organizations, and those mentioned throughout this letter, encourage you to prioritize the swift passage of these bills in the 119<sup>th</sup> Congress.**

With any questions, please contact Sarah Hohman with the National Association of Rural Health Clinics at [Sarah.Hohman@narhc.org](mailto:Sarah.Hohman@narhc.org). Thank you.

Sincerely,



Nathan Baugh  
Executive Director  
National Association of Rural Health Clinics



Alan Morgan  
Chief Executive Officer  
National Rural Health Association